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ABSTRACT

This guide is intended to help the literacy practitioner in the identification of adults with learning disabilities. These adults have worked diligently for a year or more to improve comprehension skills, writing and spelling, or work skills, yet, have made little progress. The role of screening as only the first step in a process involving a formal assessment by a qualified professional, is stressed. First, a set of questions to be answered by the literacy practitioner as he/she observes the individual is provided. Next are lists of typical characteristics of individuals with vision/hearing and/or auditory/visual processing problems. Following this is a list of typical problems in three areas of academic performance: reading, expressive language, and mathematics. A list of behavior patterns and psychological manifestations indicating the possibility of a learning disability is also provided. Finally, other means of information gathering such as reviews of records, a screening interview, a screening questionnaire, and a screening tool are suggested. (DB)

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SCREENING

for

ADULTS WITH LEARNING DISABILITIES

The Role of the Practitioner in the Assessment Process

Overview of the Assessment Process

Thousands of adults in literacy programs fit the following description. They are individuals who appear to be able and bright. They have worked diligently for a year, sometimes longer, to learn to read to improve comprehension skills, to improve their writing and spelling, or perhaps, to improve work skills. Yet, they make little, if any, progress. Could any of these individuals be having learning problems because of a learning disability?

Practitioners need informal measures for determining whether or not a particular learner may have a learning disability. Given that most participants in literacy programs are unable to afford formal testing administered by trained professionals, the information gathered by the practitioner can be particularly valuable for planning a practical approach to helping the individual meet realistic goals. In fact, the information gathered through an informal process can be as useful in planning instruction as scores from standardized testing.

The process of identifying an individual who may have a learning disability begins with a simple **screening**. This screening process cannot alone be used to diagnose the individual's situation. This step of gathering relevant information can be accomplished through observation, interviews, self-reporting, the use of a screening tool (a brief test and/or written answers to questions), and through a review of school, medical, or employment records. With this information in hand, the screener - typically an individual who does not have a specialized background in learning disabilities - plans and executes an individualized program for the learner, often after consulting with a qualified professional or professional organization on how to proceed. The information gathered through the screening process can also be a valuable introduction to the formal process of assessment.

Consulting A Qualified Professional:

If it is determined through screening that there is a strong possibility that the individual has a learning disability, a **formal assessment** can be undertaken. A formal assessment is carried out by a professionally-trained educational diagnostician, counselor, psychiatrist, or psychologist who selects, administers, and interprets different kinds of **tests** (educational, vocational, psychological, and neurological instruments) from which a **diagnosis** and **recommendations** are made. It is through a comprehensive assessment that an individual's current level of development is identified and a plan for meeting the individual's needs is developed.

While the literacy practitioner may be neither prepared nor qualified to diagnose an individual with a suspected learning disability, the practitioner can play a valuable role in getting the assessment process set in motion. The qualified professional may first refer to the screening in order to plan which tests to administer. Or, if formal assessment does not follow, the practitioner's screening results become one of the most important sources for developing a plan to help the individual with suspected learning disabilities achieve his/her goals.

SCREENING

Screening is an initial step in the process of gathering pertinent information about the individual with a suspected learning disability. The literacy practitioner can attain much valuable information if s/he knows what to look for. In terms of academic performance and related behaviors, what kinds of **observations** will the literacy practitioner be noting? The following characteristics tend to be displayed in varying degrees by individuals with learning disabilities. The lists are a good sampling, but, of course, are not all-inclusive. Making written notes of these observed characteristics, as well as collecting written samples of the learner's work, is very valuable to the screening process.

- **Can you comfortably assume that the individual is of average to above-average intelligence?** If not, the individual is, by definition, not one who has a learning disability.

- **Does the individual display signs of poor vision or hearing? Or, are you observing the effects of auditory or visual processing deficits?**

- **In terms of academic performance, is the individual having problems in the following areas: Reading (oral and silent), Expressive Language (writing, spelling, handwriting), Math?**

- **Are you observing behaviors/psychological manifestations that can interfere with the learning process?**

To help the literacy practitioner think through the answers to these questions, three broad areas of learning-related problems are briefly described below.

1. Vision/Hearing and/or Auditory/Visual Processing Problems

If vision or hearing problems are suspected, it is important that the individual be examined by an eye (optometrist) or hearing (audiologist) specialist. It may be determined that there is a physical problem, leading to prescribed eye glasses or a hearing device. Many individuals with learning disabilities have poor eye muscle coordination for focusing and refocusing at close range, have had hearing problems since early childhood that have affected their ability to learn, and may also have auditory and visual processing and memory problems.

Barring a purely physical cause, the following problems can be considered indicators of a possible learning disability:

- Eyes water and/or become red after a short time of work
- Complains of tired eyes; rubs eyes a lot
- Puts head on desk to read
- Oral reading is choppy: words skipped, endings left off, frequent repetitions
- Loses place when reading
- Talks loudly
- Often asks you to repeat yourself
- Comments about getting headaches after a short time working at reading or writing
- Squints and peers close to see print
- Peers at work on desk from an angle
- Lifts eyes from page frequently to glance around
- Closes one eye while reading or writing
- Misunderstands you
- Turns an ear towards you when you speak

2. Academic Performance

Reading:

The learner shows marked difficulty in oral and silent reading.

- Reading patterns are slow and deliberate
- Skips words, re-reads lines in oral reading
- May substitute, delete, add or transpose letters and syllables
- Loses place on page
- Avoids reading out loud
- Reads words or syllables backwards; e.g., **was** for **saw**, **net** for **ten**
- When reading silently, appears to be re-reading or reading very slowly (this can be attributable to poor visual processing)
- Cannot use basic phonics to sound out words
- Reads with an overdependence on guessing and, as such, comprehension is compromised, evidenced in errors in answering questions related to the text
- Reading style is halty and jerky

Expressive Language: *(Writing, Spelling, including Handwriting Skills)*

- Problems with grammar and syntax
- Writes letters or numbers backwards or upside down, e.g., **b** for **d**, **p** for **q**, **u** for **n**, **M** for **W**
- Spells words differently in the same document
- Weak visual memory for spelling
- Spells phonetically, cannot remember spelling patterns, e.g., **Munday**, **Toosday**, **Winsday**, **Thirsday**
- Inconsistent memory for sentence mechanics
- Reverses letters in spelling, e.g., **Friday** becomes **Firday, girl** becomes **gril**
- Mixes capital and lower case letters inappropriately, e.g., **SunDay, MoNey**
- Poor handwriting; letter formation inconsistent
- Punctuation errors are common
- Continuously whispers to self while writing
- Writing reveals poor organization

Math:

- Trouble remembering math facts and procedures
- Demonstrates inconsistent mastery of math facts (addition/subtraction, multiplication/division) due to problems with long-term memory
- Difficulty copying numbers and working with numbers in columns
- Trouble with left/right orientation
- Cannot remember in which direction to work in carrying out simple math
- Confuses similar numbers or transposes numbers
- Reads numbers backwards, e.g., **18** for **81, 21** for **12**
- Trouble following sequential procedures and directions with multiple steps

In terms of academic performance, what practitioners/instructors are looking for are **patterns of errors** exhibited by the student's work. Error patterns are important in helping to differentiate between the adult with possible learning disabilities and the adult whose low achievement is the result of other factors. Therefore, it is important that practitioners familiarize themselves with typical error patterns.

3. Behaviors/Psychological Manifestations

The following behaviors may indicate the possibility of a learning disability if observed over a considerable period of time.

- **Attention:** difficulty concentrating/focusing; easily distracted; difficult sitting still/restless; displays off-task behavior; lack of productivity; seemingly confused at times; fidgets; impatient; talks excessively; impulsive (acting without thinking and without seeming concern for consequences, saying one thing and meaning another, blurts out answers, interrupts); displays memory problems

- **Organization**: poor organization of physical environment and time, as well as concepts and tasks, including sequencing, prioritizing, grouping or categorizing, grasping similarities between items, relating parts to the whole; orientation problems/difficulty with directionality: left/right, up/down, and north/south/east/west

- **Other General Behaviors**: variable or unpredictable performance; difficulty absorbing major ideas from an oral presentations (instructions, lectures, discussions); information must be repeated and reviewed before understanding is achieved; problems with following directions; difficulty retaining information without excessive rehearsal and practice; cannot recall familiar facts on command, yet can do so at other times; visual difficulties, auditory difficulties, poor decision-making skills; difficulty drawing conclusions, making inferences, dealing with abstractions; poor motivation and/or extreme drive to complete a task; most comfortable with familiar, unchanging settings; perseveration (staying on task or using a procedure past the point of its being appropriate); rigidity

- **Social:** social situations difficult, noticeably out of place in group setting; misinterprets what others say, tone of voice, facial expressions, the subtleties in social situations; lacks awareness of one's personal space; difficulty in establishing friendships

It is important to note that many of these observed learning characteristics and behaviors result from problems that the individual experiences in the areas of **visual discrimination** and **visual memory**, as well as **auditory discrimination** and **auditory memory**. Visual discrimination refers to the learner's ability to detect differences in forms, letters, and words. Visual memory is concerned with the individual's ability to retain a full mental image of what s/he has seen. In both instances, the central nervous system is not processing symbols correctly. Auditory discrimination involves the ability to recognize the differences between sounds. Auditory memory refers to the learner's ability to store and recall what has been heard. The result of an auditory deficit is that the individual fails to hear vowel or soft consonant sounds in spoken words. **Auditory and visual deficits** affect one's ability to develop and use language effectively; the effects are apparent in reading, writing, and spelling skills.

Other Means of Information-Gathering

Samples of the learner's work and observations of the individual's learning characteristics and behaviors can be recorded on an **observation checklist**. In addition, the information-gathering process can include (1) **reviews** of school, medical, and employment records (wherein patterns of problems may be evident and should be noted); (2) a **screening interview** during which the individual can be encouraged to self-report problems in academic, social, medical, and employment areas, including similar information about family members to help determine possible familial factors known to correlate with learning disabilities; (3) a **screening questionnaire**; and (4) a **screening tool** (an instrument for which the administrator should be trained to use). For excellent examples of an observation checklist and a screening questionnaire, see the Learning Disabilities Association of Canada (LDAC) publication listed under "**References**."

For samples of screening tools, see the Tennessee Literacy Resource Center's publication, listed in **"References."** Operating under a grant from the U.S. Department of Education and working with Tennessee educators, the Tennessee Literacy Resource Center, University of Tennessee Knoxville, established a research project that reviewed a variety of screening tools used for "identifying and helping adults who find learning difficult," reporting strengths and limitations of each tool.

Heading the list of the Tennessee Literacy Resource Center's recommendations for screening incoming literacy participants is "Informal Observation and Work Samples." The research group found that careful observation was so valuable to the assessment process that it recommended training to sharpen the practitioner's observation skills. "After careful observation, and using a checklist or other documentation, we were able to talk with students about how they learn, the strategies they use, and their preferences, in a much more focused and productive manner." Obviously, the literacy practitioner is in a position to make valuable input into the assessment process.

While formal testing provides the most accurate basis for planning an individualized learning program, the observations noted in the informal screening process serve a number of purposes:

- Screening sets the stage for the practitioner to help learners with suspected learning disabilities to understand their strengths and weaknesses and the reasons behind their struggles and difficulties.
- The informal nature of the information-gathering process in screening enables the practitioner to include the learner in determining appropriate instruction.
- Informal screening opens the door for discussion between the practitioner and the learner regarding which strategies and/or interventions, if any, have been tried in the past.
- Screening can help establish the foundation for discussion between the practitioner and the learner about realistic long-range goals translated into short-term objectives.

- Screening helps the practitioner identify special materials and strategies to be used in setting up an individualized learning situation for the student.

For follow-up, the practitioner needs to be aware of local sources of testing and other services to which the learner can be referred. The adult education/adult literacy program/literacy council with which the practitioner is aligned should have a list of recommended resources. Depending on the particular locale, these resources may include (1) the State Vocational Rehabilitation Agency, (2) community mental health agencies, (3) special education departments, disability support services offices, counseling, and study skills centers at universities or local community colleges, (4) educational therapists or learning specialists in private practice, (5) Orton Dyslexia Society, (6) the local chapter of Learning Disabilities of America (LDA), (7) private schools or institutions specializing in learning disabilities, and (8) university affiliated hospitals.

Literacy practitioners can be a vital link in the overall assessment process. If the individual with suspected learning disabilities does not undergo a complete assessment, informal screening provides the major source of information for establishing both long-range goals and short-term objectives, and for identifying instructional methods and materials needed to establish an individualized program that meets the learner's needs.

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